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PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Marcus W. May
Group Art Unit	
Examiner Name	
Attorney Docket Number	SIG000086

I hereby appoint:

Practitioners at Customer Number

34,399

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Practitioner(s) named below:

Name	Registration Number
Bruce E. Garlick	36,520
Timothy W. Markison	33,534
James A. Harrison	40,401
Shayne X. Short, Ph.D.	45,105

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Firm or Individual Name	Bruce E. Garlick				
Address	P.O. Box 160727				
Address					
City	Austin	State	TX	Zip	78716-0727
Country	USA				
Telephone	512-264-8816		Fax	512-264-3735	

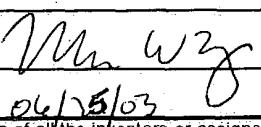
I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Marcus W. May	
Signature		
Date	06/25/03	

Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.

NOTE: Submit multiple forms if more than one signature is required; see below*.

*Total of 1 forms are submitted.

SEND TO: Assistant Commissioner for Patents,
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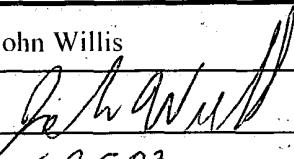
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Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	John Willis	
Signature		
Date	6-25-03	
NOTE:	Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required.	
NOTE:	Submit multiple forms if more than one signature is required, see below.*	
<input checked="" type="checkbox"/>	*Total of 1 forms are submitted	SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing
OR Declaration Submitted after initial Filing (surcharge (37 CFR 1.16(e)) required)

Attorney Docket Number	SIG000086
First Named Inventor	Marcus W. May
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

VARIABLE BANDGAP REFERENCE AND APPLICATIONS THEREOF

the specification of which

(Title of the Invention)

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checkign the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Applications Numbers(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119 (e), 120, or 365(c) of any U.S. or PCT application(s) listed below.

Application Numbers(s)	Filing Date (MM/DD/YYYY)	Additional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/429,941 <input type="text"/> <input type="text"/> <input type="text"/>	11/29/2002 <input type="text"/> <input type="text"/> <input type="text"/>	<input type="checkbox"/>

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DECLARATION - Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	34,399	OR <input checked="" type="checkbox"/> Correspondence address below
Name Bruce E. Garlick				
Address P.O. Box 160727				
Address				
City Austin		State TX	ZIP 78716-0727	
Country USA		Telephone 512-264-8816		FAX 512-264-3735
I hereby declare that all statements made herein of my own knowledge are true and that all statements made oninformation and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname		
Marcus W.		May		
Inventor's Signature		Date 06/25/03		
Residence: City Austin		State TX	Country USA	Citizenship USA
Mailing Address 3204 Thousand Oaks Dr				
Mailing Address				
City Austin		State TX	ZIP 78746	Country USA
NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any])		Family Name or Surname		
John		Willis		
Inventor's Signature		Date 6-25-03		
Residence: City Austin		State TX	Country USA	Citizenship USA
Mailing Address 6530 Clairmont Drive				
Mailing Address				
City Austin		State TX	ZIP 78749	Country USA
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheets(s) PTO/SB/02A attached hereto.				